CASE #1

## Client Characteristics

A 17-year old male during a hockey game when he collided with a player from the other team.  The impact of the collision resulted in a direct blow to the front of his head and he immediately lost consciousness and fell to the ice. The loss of consciousness was brief and lasted about 2 minutes. Once he regained consciousness, he reported feeling dizzy and confused. He was taken by ambulance to the emergency department where he needs to be assessed and diagnosed. The next day, he felt increasingly dizzy, nauseous and complained of an intense headache.

Over the next few months he reports losing his balance quite often and having constant headaches. He has also been experiencing depression and has trouble concentrating. His mother has noted that he has become quite irritable and will often lash out on his family for no reason. He has a history of concussion about 1 year ago, but with rest the symptoms resolved within a couple of weeks. It has now been 3 months since his injury.

Clinical Impression

Patient is a previously active 17-year old who has sustained a concussion 3 months ago.  He presents with decreased and painful cervical mobility, dizziness, impaired balance and eye movements, and intense headaches which affect his ability to complete school work and participate in sports.  Personal factors that may be contributing to pain are depression, fear of movement, and high irritability.

The patient’s previous functional level and supportive home environment are factors indicating a high likelihood of a full recovery and return to sport.

**Problem List**

* Headaches and nausea (caused by neck movement and using phone)
* Eye movement slower than normal and affecting ability to complete school work
* Balance and dizziness issues affecting ability to be physically active
* Fear of movement also affecting physical activity
* Depressive symptoms including lack of motivation
* Personality changes including impatience and quick to anger

**Case Questions**

1. What is the potential problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What part(s) of the brain might be affected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What brain scan to test for the problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. What type of neurotransmitter to treat the problem or pain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

CASE #2

Clinical Impression

A 60-year-old male patient presents with complaints of rapid fatigue, postural instability, and a lack of interest in all social events for the past two years.

Patient is a previously independent, and presents with decreased balance, mild increase tone, mild resting tremor, mild festinating gait, reports increased levels of fatigue with activity, and reports needing assistance with bathing and grocery shopping. Patient lives in a supportive home, however needs to climb 3 flights of stairs to get into his apartment.

**Problem List**

* Decreased balance
* Mild increased tone
* Mild resting tremor
* Mild festinating gait
* Increased fatigue
* Dependence with bathing and grocery shopping

**Case Questions**

1. What is the potential problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What part(s) of the brain might be affected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What brain scan to test for the problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. What type of neurotransmitter to treat the problem or pain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

CASE #3

Clinical Impression

Mrs. Starville, a 42 year old female. She previously worked as a full-time administrator at a real estate office. She is recently unemployed due to the worsening of her cognitive symptoms such as memory deficits and confusion. Her chief complaints include mild difficulties with gait, balance, and being fatigued easily. She noted that she has stumbled and tripped several times in the past 3 months but was fortunately not hurt. She has also noticed the increasing difficulty she is having with fine motor skills such as writing and doing up her buttons when dressing.

**Problem List**

* Decreased postural control: due to weakness with external perturbations
* Decreased balance: instability during gait, especially during dual tasks
* Decreased L/E muscle strength and proprioception
* Reduced aerobic capacity
* Decreased fine motor control and coordination
* Memory impairment: difficulty remembering instructions and task components
* Increased fatigue secondary to depression

**Case Questions**

1. What is the potential problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What part(s) of the brain might be affected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What brain scan to test for the problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. What type of neurotransmitter to treat the problem or pain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_